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DEC 28 1994

INFORMATION REQUESTS

SUPERFUND PROGRAM
MANAGEMENT BRANCH

1. Full Legal Name of Business: ALBION SHOU SERVICE
2. Address: 100 E. MICH. AVE
ALBION, MICH.
3. Telephone Number: (include area code) 517-629-4910
4. Describe the type of business you owned and/or operated at 100 E. Michigan in Albion, MI. GASOLINE SERVICE STATION Doing
AUTO SERVICE & REPAIRS
5. Has your business used any other names since 1966? YES ☒ NO
If YES, state previous business Name and Address.
6. Dates of Operation (under each name). 7-1-79 TO 6-1-88
7. Is your business owned by or affiliated with any other business? YES ☒ NO If yes, state name of affiliated business.
8. Has your business changed ownership or affiliation anytime since 1966? ☒ YES ☐ NO
Was this a Stock sale? ☒ YES ☐ NO
Was this an asset sale? ☒ YES ☐ NO
Other (please specify) _____
State name and address of prior owner/affiliate.
EUGENE TUCKER
110 PLUM ST. MARSHALL, MICH. 49068
9. Respond to the following concerning your business operations during the period 1966 to 1981.
Did you change oil? ☒ YES ☐ NO



Did you change antifreeze and other motor vehicle fluids?

YES

NO

Did you have hydraulic equipment?

YES

NO

Did you use any solvents?

YES

NO

Did you use any paints?

YES

NO

10. If your answer to any of the questions in number 8 above was YES, respond to the following:

Where did you dispose of the waste material from these operations (state time frames for each disposal location)?

7-1-79 TO 6-1-88 OIL & OIL RELATED PRODUCTS WERE COLLECTED IN A STORAGE TANK

PAINT CANS & BRUSHES WERE DISPOSED OF IN COMMERCIAL TRASH CONTAINERS

Who transported the waste material to each disposal location? (Specify transporter name and address)

STODDARD WASTE OIL

OIL TANK PUMPED OUT AND TRANSPORTED FOR RECYCLE BY WAYLAND, MICH.

ALBION, MICH.

TRASH WAS PICKED UP AND HAULED BY ALBION REFUSE SERVICE 7-1-79 TRUCK GOING OUT OF BUSINESS

I'M NOT SURE OF YEAR - LATER T.U. 6-1-88 PICKED UP BY BFT SERVICE - JACKSON, MICH.

11. Have you, or any of your agents or employees, ever arranged to dispose of any waste at the Site or arranged to dispose of waste with any hauler who may have disposed of the material at the Site? YES NO

If your response to number 10 was YES, answer numbers 11, 12, 13 and 14 below. If NO, skip to number 15. I ASSUME THIS SHOULD BE #11

12. State the date, or if unknown, approximate date, of each transaction to dispose of waste at the Site and/or with any waste hauler who may have disposed of the material at the Site.

(Submit copies of all supporting documents.)

13. What type of material did you arrange to dispose of at the Site? (Check each applicable substance)

Waste oil	_____	Antifreeze	_____
Spent solvents	_____	Waste grease	_____
Paints	_____	Cleaning Fluids	_____
Gasoline	_____	Diesel fuel	_____
Batteries	_____	Battery Acid	_____
Tires	_____	Gear Lube	_____
Hydraulic/Transmission/Brake Fluids	_____		_____
Other Material (Please specify):	_____		

-
-
-
14. For each substance identified in number 12, estimate the total volume or number of gallons that you arranged to dispose of at the Site.
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(If exact figures are available please state amount and supply supporting documentation.)


15. Is the only material you arranged to dispose of at the Site oil you accepted for collection from private citizens who changed their own oil? (Do not circle YES if you also sent material from vehicles your business serviced or if you mixed other material with this "recycled oil.") YES NO
All motor oil picked up by STANDARD WASTE OIL - NO OIL EVER PUT IN LANDFILL
16. Do you know the names of any other businesses that arranged to dispose of waste at the site or who arranged to dispose of waste with a waste hauler who disposed of the waste at the Site? If so, state the name, address and type of waste, if known, for each business.

No

If you need additional space for any of your responses use the following.

AFFIDAVIT

I, the undersigned, being first duly sworn on my oath, depose and state that I have conducted a reasonably prudent search for facts, data and documents which included interviewing knowledgeable persons and examining relevant documents and that the above are true responses to the questions and information requests.



Your Signature

10399 CONBIT RD

Home address

ALBION, MICH. 49224

City, State and Zip

MIKE A. EGNATUK

Print your name

517-629-4794

Home Phone

517-568-4585

Business Phone

MIKE A. EGNATSK
10399 CONDOT RD
AUBURN, MICH. 49884

Fold at line over top of envelope to the
right of the return address

CERTIFIED

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MAIL



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**RETURN RECEIPT
REQUESTED**

EUETTE L. JONES
SUBFUND PROGRAM MANAGEMENT BRANCH, HSM-55
U.S. ENVIRONMENTAL PROTECTION AGENCY
77 WEST JACKSON BLVD.
CHICAGO, ILL. 60604